P70 SBMs (08.0) U.S. Patentiano Tracemani Officia U.S. DEPARTMENT OF COMMUNICAL Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OCIB or narcon injure 8919 I I C PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN. 13 FILE CLAIMS AS FILED - PART I OF ! SMALL ENTITY-SMALL ENTITY (Column 2) (Column 1) FFF FEE RATE NUMBER EXTRA RATE NUMBER FILED FOR EASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS x s ___'__ OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS OR minus 3 = (37 CFR 1.16(5)) OR (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR TOTAL TOTAL 1 If the difference in column 1 is less than zero, enter 101 in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY. (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-RATE PRESENT RATE ADDI-NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY AFTER FEE_ ENDMENT FEE PAID FOR AMENDMENT Total (37 CFR 1,36(d)) Minus OR X. S Independent (37 CFR 1 (48%) Minus OR: hange AZ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d)) TOTAL TOTAL ADD L FEE OR. ADD LIFEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS -DD:--RATE ADDI-PRESENT RATE Θ NUMBER REMAINING TIONAL EXTRA TIONAL PREVIOUSLY NDMENT AFTER FEE FEE AMENDMENT PAID FOR Minus Total OR G7 CFR 1 16(c)) Independent (37 CFR 1,34(b)) Minus OR. ш FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d)) OR: TOTAL TOTAL - --ADD'L FEE ADD LIFEE OR. (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDE I RATE ADDI-PRESENT RATE REMAINING NUMBER TIONAL TIONAL **EXTRA** PREVIOUSLY **AFTER** ENDMENT FEE FEE PAID FOR AMENDMENT Total Minus OR S Independent (47 CFR 1 Teleti ให้เกบร OR!

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,15(d))

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column."

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this binder, sincide sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL

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PATENT APPLICATION FEE DETERMINATION RECORD 02-116 Effective January 1, 2003 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN OR SMALL ENTITY TYPE _ (Column 2) (Calumn 1) FEE FEE: RATE RATE TOTAL CLAIMS \$750 ASIC FEE BASIC FEE **\$375** NUMBER EXTRA OR NUMBER FILED FOR X\$18= 7 minus 20= D X\$ 9= TOTAL CHARGEABLE CLAIMS D OR minus 3 = · X42= 0 XB4= INDEPENDENT CLAIMS . OR MULTIPLE DEPENDENT CLAIM PRESENT +280= +140= OR • If the difference in column 1 is less than zero, enter "o" in column 2 OR TOTAL TOTAL OTHER THAN **CLAIMS AS AMENDED - PART II** SMALL ENTITY SMALL ENTITY OR (Column 2) (Cotumn 3) (Column 1) ADDI-PALL गालगदन NUMBER PRESENT **FIONAL** REMAINING RATE TIONAL RATE PREVIOUSLY EXTRA AFTER FEE PAID FOR MENDMENT X\$18= XS 9= Total Minus ÓŘ X84= 面 Minis X42-Independent OÄ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ******* +140± N. 2 TOTA OR ADDIT FEE ADDIT, FEE (Column 3) (Column 2) (Column 1) ADDI-गारामाद्रका CLAIMS ADDI-PRESENT NUMBER REMAINING TIONAL TIONAL RATE 0 RATE PREVIOUSLY. EXTRA AFTER FEE. PAID FOR AMENDMENT X\$18-OR ¥2 9± Mires Total . -X84= Mihus X42= independent OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +140= OR TOTAL OR ADDIT. FEE ADDIT, FEE (Cotumn 3) (Column 2) (Column 1) ADDP. Highest CLANS ADDI-PRESENT NUMBER REMADUNG TIONÁL RATE PREVIOUSLY EXTRA AFTER FEE PAID FOR AMENDMENT 1.7.32 * XS18± ÖŔ X\$ 9= Minus Total Minus X84= Independent X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= ±140= OR * If the entry in column 1 is less than the ntry in column 2, writ "0" in column 3.

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The Thighest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3."

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Application or Docket Number